

# Attitudes Toward Parenting: Modern Views & Challenges

Authored by  
**mohammed looti**

November 22, 2025

## RECOMMENDED CITATION

mohammed looti (2025). *Attitudes Toward Parenting: Modern Views & Challenges*.  
Psychepedia. Retrieved from <https://psychepedia.arabpsychology.com/?p=25860>

## Introduction: Defining Attitudes and Parental Relationships

Attitudes toward parents represent a foundational construct within developmental and social psychology, serving as the earliest and often most enduring template for subsequent interpersonal relationships and self-perception. An attitude, in general psychological terms, is defined as a relatively stable organization of beliefs (cognitive component), feelings (affective component), and behavioral tendencies (conative component) toward a specific object or person. When applied to parents, this organization is profoundly complex because the parent-child relationship is not merely an interaction; it is the primary matrix through which the child is socialized, gains security, and develops a sense of self. The attitude formed is a subjective evaluation of the caregiver's availability, warmth, competence, and reliability, influencing everything from academic performance to intimate partner selection in later life. Understanding these attitudes requires acknowledging their dual nature: they are both highly personal, rooted in unique family dynamics, and universally relevant, given the biological and social necessity of parental figures.

The uniqueness of attitudes toward parents stems from their involuntary and primary nature. Unlike attitudes formed toward political figures or consumer goods, which are often learned through media or peer influence, attitudes toward primary caregivers are forged in the crucible of absolute dependency during infancy. This deep, early conditioning means that these attitudes are not easily shifted by simple rational argument; they are often deeply embedded in the individual's emotional core and are resistant to change, even when the adult recognizes the irrationality of certain feelings. Psychologically, the child internalizes the representation of the parent, creating an **Internal Working Model (IWM)** of relationships. This internalized representation--the attitude--acts as a filter through which all future authority figures and close relationships are perceived, making the study of parental attitudes essential for understanding psychopathology and relational health across the lifespan.

Furthermore, attitudes toward parents are inherently reciprocal, though the focus here remains on the child's perspective. The parent's attitude and behavior (e.g., parenting style) directly shape the child's response, creating a feedback loop that solidifies the child's attitude over time. While positive attitudes often correlate with perceived parental support and responsiveness, negative attitudes frequently stem from experiences of neglect, inconsistency, or excessive criticism. It is crucial to delineate that the attitude is not necessarily a reflection of the parent's objective quality as a caregiver but rather the child's subjective, highly charged emotional interpretation of the parental behaviors encountered. Thus, two siblings raised in the same environment may develop markedly different attitudes based on their unique temperaments and interpretations of shared experiences, highlighting the role of individual cognitive processing in attitude formation.

## Theoretical Frameworks for Attitude Formation

Several major psychological theories provide frameworks for understanding how attitudes toward parents are initially formed and subsequently maintained or altered. Psychoanalytic theory, originating with Freud, posits that attitudes toward parents are deeply rooted in unconscious processes and the resolution of early psychosexual conflicts, particularly the **Oedipus or Electra complex**. According to this view, the child develops complex emotional attachments, including both intense love and rivalry, which must be resolved through identification with the same-sex parent. This identification process leads to the internalization of parental values and prohibitions, forming the superego. The resulting attitude is thus a complex amalgam of internalized object relations, guilt, admiration, and fear. Later object relations theorists expanded on this by emphasizing the internalization of "good" and "bad" object representations, suggesting that the integration or splitting of these representations forms the core of the adult's attitude toward self and others, fundamentally dependent on the quality of early parental care.

In contrast to the depth psychology approach, Social Learning Theory, championed by Bandura, emphasizes the role of observation and modeling in attitude acquisition. From this perspective, children learn attitudes toward their parents not only through direct interaction (e.g., being praised or punished) but also by observing how others interact with the parent, and how the parent interacts with the world. If a child observes a parent handling stress with calm resilience, the child is likely to internalize an attitude of respect and competence toward that parent. Conversely, if the child witnesses the parent exhibiting inconsistent behavior or emotional volatility, the resulting attitude will incorporate elements of distrust or unpredictability. The attitude is reinforced through continuous observational learning and **vicarious reinforcement**, making the parent a primary behavioral model whose actions are constantly evaluated and incorporated into the child's cognitive framework regarding authority and intimacy.

Perhaps the most influential framework in contemporary research is **Attachment Theory**, developed by Bowlby and Ainsworth. This theory directly links the quality of the primary caregiver relationship to the formation of the child's Internal Working Models (IWMs), which are essentially the crystallized attitudes toward the self (worthiness of care) and the primary caregiver (availability and responsiveness). A consistently responsive and warm parent fosters a **secure attachment**, leading to a positive, trusting attitude characterized by the belief that the parent is accessible when needed. Conversely, inconsistent or rejecting parenting leads to insecure attachments (avoidant, ambivalent, or disorganized), resulting in attitudes marked by apprehension, hostility, or emotional distance. The IWMs established in the first few years of life are robustly predictive of later attitudes toward parents, demonstrating that the affective quality of early care is the most significant determinant of the child's long-term evaluation of the parental figure.

## Developmental Trajectories of Parental Attitudes

The attitude a child holds toward a parent is not static; it undergoes significant transformation across different developmental stages, reflecting both the child's increasing cognitive capacity and changing relational needs. In early childhood, attitudes are characterized by idealization and profound dependency. The parent, particularly the primary caregiver, is often viewed as omnipotent and infallible--a source of absolute security and nourishment. Cognitive limitations during this period mean that attitudes are often polarized; the child may engage in "splitting," seeing the parent as either entirely "good" (when needs are met) or entirely "bad" (during frustration or discipline). This idealization is developmentally necessary as it provides the emotional security required for early exploration, but it presents an incomplete and simplistic attitude that must be revised as the child matures.

As children enter middle childhood (ages 6-12), cognitive development allows for more complex and differentiated attitudes. The child begins to recognize the parent as an individual with flaws and limitations, moving away from the earlier idealized image. This realization is supported by increased exposure to external reference groups, such as peers and teachers, which provide comparative data regarding parental norms and behaviors. While authority is generally accepted and respect remains high, the child may start to critically evaluate specific parental decisions or rules. For instance, a child might retain a positive affective bond but develop a negative cognitive component regarding the parent's competence in certain domains (e.g., "Dad is great, but he doesn't understand technology"). This stage is characterized by a balancing act between maintaining familial loyalty and developing an objective, nuanced perspective of the parent.

The most significant and often volatile shift in parental attitudes occurs during **adolescence**. The central developmental task of this period is separation-individuation--the establishment of an independent identity distinct from the family unit. This necessitates a critical re-evaluation of parental values, beliefs, and authority. Attitudes often temporarily shift toward negativity, characterized by heightened criticism, conflict, and resistance to parental control. This apparent negativity is often functional, serving as a psychological mechanism to facilitate necessary emotional distance and autonomy. While parental attitudes during this phase may seem hostile, underlying affection and reliance often remain intact, particularly in families with secure attachment histories. However, if the adolescent perceives the parent as overly controlling or dismissive of their burgeoning autonomy, the negative attitudes can solidify into chronic resentment, leading to enduring relational rupture that persists into adulthood.

## Attitude Shifts in Emerging Adulthood and Beyond

Emerging adulthood (ages 18-29) marks a critical period of attitude restructuring, often characterized by a transition from adolescent conflict back toward mature acceptance. As young

adults gain physical and financial independence, the intense, often oppositional, attitudes of adolescence tend to soften because the immediate threat of parental control diminishes. The relationship shifts from a hierarchical structure to one of increasing equality. This allows the young adult to view the parent less through the lens of authority and more through the lens of shared history and individuality. Attitudes developed during this stage often incorporate empathy and compassion, as the young adult begins to understand the pressures and limitations faced by their parents. This re-evaluation often leads to a more positive and complex attitude, provided that the relationship was fundamentally secure prior to the adolescent strain.

Throughout established adulthood, attitudes toward parents continue to evolve, heavily influenced by life milestones such as marriage, career establishment, and, most significantly, becoming a parent oneself. When an individual assumes the parental role, they often experience a profound shift in perspective, leading to increased empathy and a deeper appreciation for their own parents' efforts and sacrifices. This shift can transform previously negative or ambivalent attitudes into acceptance or even admiration, a phenomenon often described as the "cycle of generativity." Furthermore, as parents age, the relationship dynamic often involves a subtle or overt role reversal. The adult child may transition into a supportive or even caregiving role, which tests the established attitude structure. Attitudes characterized by respect and affection generally facilitate this transition smoothly, whereas relationships marked by historical conflict or unresolved trauma struggle under the added weight of dependency.

The final phase of life, encompassing the later years of both parent and child, solidifies the enduring attitude. Attitudes during this stage are heavily influenced by the process of **legacy and reconciliation**. If historical conflicts were resolved, attitudes often settle into deep respect, companionship, and reflective gratitude. However, if the relationship remains characterized by unresolved emotional wounds, the adult child may maintain a distant or hostile attitude, sometimes manifesting as neglect or refusal to engage in caregiving responsibilities. Research indicates that the subjective quality of the current relationship often outweighs the memory of childhood events in determining late-life attitudes, emphasizing the lifelong capacity for relational repair and attitudinal adjustment. Nevertheless, the deeply internalized IWMs from childhood continue to exert subtle influence, especially during times of high stress or loss, confirming that attitudes toward parents are dynamic yet intrinsically linked to their origins.

## Dimensions of Parental Attitudes

Attitudes toward parents seldom exist as monolithic positive or negative constructs; rather, they are complex, multi-dimensional structures encompassing ambivalence, identification, and conflict. **Ambivalence** is arguably the most common and psychologically challenging dimension. It involves the simultaneous holding of contradictory feelings--such as love and resentment, admiration and disappointment--toward the parent. This emotional duality is difficult to manage because it violates

the cognitive need for consistency, often leading to internal distress or unstable relational behavior. For example, an adult may feel intense gratitude for a parent's financial support while simultaneously harboring deep resentment over emotional neglect. The persistence of ambivalence suggests that the individual has not fully integrated the "good" and "bad" aspects of the parental object representation, requiring continuous psychological energy to manage the conflicting emotions.

Another critical dimension is **Identification**, which refers to the adoption of parental values, behaviors, and beliefs, often unconsciously. Positive identification is a cornerstone of normative personality development, allowing the child to inherit socially appropriate skills and moral frameworks. If the attitude toward the parent is largely positive, identification is usually seamless and beneficial, leading to confidence and competence. However, identification becomes problematic when the parent is dysfunctional or abusive. In cases of trauma, the child may engage in **identification with the aggressor**, internalizing the destructive characteristics of the parent as a defense mechanism, leading to self-destructive behaviors or difficulties in forming healthy relationships later in life. The degree and nature of identification are direct measures of the depth and positivity of the internalized parental attitude.

Finally, **Conflict and Criticism** represent a common behavioral dimension of parental attitudes, particularly during periods of separation-individuation. While mild conflict is a healthy marker of boundary setting and autonomy development, chronic, severe conflict suggests a deeply negative attitudinal core. This dimension is characterized by overt expressions of dissatisfaction, rejection of parental advice, and high levels of perceived interference. If the attitude is predominantly critical, the individual may struggle to maintain any form of close contact, viewing the parent solely through the lens of historical failure or emotional injury. The resolution of this dimension is vital for adult well-being; those who successfully navigate conflict and arrive at a place of forgiveness or managed distance typically report healthier psychological outcomes than those whose attitudes remain dominated by unresolved hostility.

## Impact of Parenting Styles on Attitudinal Outcomes

The authoritative classification of parenting styles--authoritative, authoritarian, permissive, and neglectful--developed by Baumrind and Maccoby, provides a robust framework for predicting specific attitudinal outcomes in children. The **authoritative parenting style**, characterized by high levels of warmth, clear communication, and reasonable demands, consistently fosters the most positive attitudes toward parents. Children raised in this environment tend to view their parents with respect, trust, and affection. Their attitudes incorporate a balance between high regard for parental competence and a healthy sense of self-efficacy, knowing their opinions are valued. This style produces attitudes that are secure and internalized, leading to open communication and reduced conflict during critical developmental phases like adolescence.

In contrast, the **authoritarian parenting style**, which is low in warmth but high in rigid demands and control, often results in highly ambivalent or overtly negative attitudes. While children may exhibit outward compliance and respect due to fear of punishment, their internalized attitude is frequently characterized by resentment, suppressed anger, and a perception of the parent as overly harsh or unyielding. This leads to a defensive attitude where the child hides their true feelings and behaviors from the parent. Research shows that attitudes formed under authoritarian regimes often struggle with independence in adulthood, either becoming overly dependent on external authority or reacting with intense, sometimes destructive, rebellion against any form of control, reflecting the unresolved hostility toward the internalized parental figure.

The permissive and neglectful styles also generate distinct negative attitudinal profiles. **Permissive parenting**, characterized by high warmth but low demands and structure, often results in attitudes that lack respect for parental authority. Children may view their parents as friends rather than guides, leading to entitlement or disregard for parental rules, translating into an attitude that lacks genuine deference. Most detrimental are the outcomes associated with **neglectful parenting**, which involves low warmth and low demands. This style fundamentally damages the child's ability to form a positive attitude, leading to feelings of profound abandonment, worthlessness, and a generalized mistrust of caregivers. The internalized attitude in this scenario is often one of avoidance and emotional detachment, highly predictive of difficulties in forming secure attachments and managing intimate relationships throughout the lifespan.

## Measurement and Clinical Implications

The measurement of attitudes toward parents presents unique challenges due to the deeply personal and often emotionally charged nature of the construct, as well as the pervasive influence of social desirability bias. Researchers utilize a variety of methods, including self-report questionnaires, projective techniques, and observational measures. Self-report scales, such as the **Parent-Child Relationship Questionnaire (PCRQ)** or the Parental Acceptance-Rejection Questionnaire (PARQ), assess the cognitive and affective components directly, asking individuals to rate their feelings of closeness, conflict, or perceived parental behavior. However, these scales are highly susceptible to the respondent adjusting their answers to align with perceived social norms regarding familial loyalty.

To bypass conscious distortion, projective techniques, such as the Thematic Apperception Test (TAT) or sentence completion tasks, are sometimes employed. These methods aim to uncover unconscious attitudes and internalized representations by asking the individual to interpret ambiguous stimuli related to family scenarios. Furthermore, observational measures, particularly in clinical settings, focus on the adult child's behavior and non-verbal communication during interactions with the parent, providing valuable insight into the conative component of the attitude--avoidance, deference, or overt hostility--that might contradict self-reported positive feelings. The

synthesis of these different measurement approaches is essential for obtaining a comprehensive and valid assessment of the individual's complex attitudinal structure.

The clinical implications of deeply entrenched, negative attitudes toward parents are extensive and foundational to much of adult psychopathology. Unresolved conflict, severe ambivalence, or attitudes rooted in trauma (e.g., parental abuse or neglect) often manifest as chronic depression, anxiety, difficulties in emotional regulation, and personality disorders. In therapeutic settings, particularly those employing psychodynamic or attachment-focused approaches, significant clinical work involves helping the client identify, understand, and restructure these internalized parental attitudes. The goal is not necessarily to change the historical reality of the relationship but to revise the **Internal Working Model**--moving from a rigid, negative attitude to a more flexible, integrated, and realistic one that allows for autonomy and healthy relational functioning. Ultimately, the attitude toward one's parents is a powerful predictor of one's capacity for health, intimacy, and resilience across the entire lifespan.